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FEE TRANSMITTAL FY 2005 JUN 1 3 2005 G

Complete if Known							
09/575,283							
May 22, 2000							
Bergh							
3623							
Stimpak, J.							
MSC-001							
	09/575,283 May 22, 2000 Bergh 3623 Stimpak, J.						

METHOD OF PAYMENT		FEE CALCULATION (continued)				
Payment Enclosed:		3. ADD	ITIONAL	FEES		
☐ Money Order ☐ Other		Large	Small			
		Entity	Entity	B B 13	E D '1	
	Commissioner is hereby authorized to		Fee	Fee	Fee Description	Fee Paid
	harge any fee indicated below for this	submission	(\$)	(S)		
to Deposit Account No. 07-1700.		130	65	Surcharge - late filing fee or oath		
Required Fees (copy of this sheet enclosed). Additional fee required under 37 CFR 1.16 and 1.17.		50	25	Surcharge - late provisional filing fee or cover		
M Aud	intonar tee required under 37 CFK 1.10	ballu 1.17.] 30	23	sheet	
⊠ Ove	rpayment Credit.		130	130	Non-English specification	
3. Applicant claims small entity status.		2,520	2,520	Request for ex parte reexamination		
FEE CALCULATION		120	60	Extension for reply within first month	60.00	
FILING/SEARCH/EXAM/SIZE FEES		450	225	Extension for reply within second month		
Large Enti	ty		1020	510	Extension for reply within third month	
Fee (\$)	Fee Description	Fee Paid	1590	795	Extension for reply within fourth month	
, ,	·		2160	1080	Extension for reply within fifth month	
300	Utility filing fee		500	250	Notice of Appeal	
500	Utility search fee		500	250	Filing a brief in support of an appeal	
200	Utility exam fee		1000	500	Request for oral hearing	
250	Utility Size fee (each add'l 50 pgs. over 100)	<u> </u>	400	400	Petitions to the Commissioner (Gp. I)	
200	Design filing fee		200	200	Petitions to the Commissioner (Gp. II)	
100 130	Design search fee	<u> </u>	130 180	130 180	Petitions to the Commissioner (Gp. III) Submission of Information Disclosure	
250	Design exam fee Design size fee (each add'l 50 pgs. over 100)	-	180	180	Statement Statement	
230	Design size fee (each add 150 pgs. over 100)	L	790	395	Filing a submission after final	
			''	373	rejection (37 CFR 1.129(a))	
	Number Number Rate	Amount	790	395	For each additional invention to be	
	Filed Extra				examined (37 CFR 1.129(b))	
Total Claims	-20 = x \$50.00 =	=	100	100	Certificate of Correction for	
				applicant's error		
Independent		130	65	Submission of Terminal Disclaimer		
Claims $-3 = x $200.00 =$		Other fee		Request for Continued Examination	395.00	
☐ Multiple Dependent Claim(s), if any \$360.00 =		Other fee	(Specify)			
Multiple Dependent Claim(s), if any \$360.00 = TOTAL:			ŀ			
SMALL ENTITY DISCOUNT:		ļ				
SUBTOTAL (1) (\$) 0.00]				
2. AMENDMENT CLAIM FEES					_	
Claim	· ·	Fee Paid			SUBTOTAL (3)	(\$) 455.00
Remaining Previously Extra						
After Am	end. Paid For					
Total - = x \$ 50.00 = SUBTOTAL (1) 0.			0.00			
Indep = $x $200.00 =$		SUBTOTAL (2) 0.00				
First Presentation of Multiple Dep. Claim + \$360.00=			SUBTOTAL (3)	455.00		
	TOTAL: (\$)					
S	SMALL ENTITY DISCOUNT:	(\$)	-			
	SUBTOTAL (2)	(\$)0.00				
CORRESPONDENCE ADDRESS		ļ		SIGNATURE BLOCK		
Direct all correspondence to:					Respectfully submitted,	
Patent Administrator		Date: June 13, 2005				
Goodwin Procter LLP		Reg. No.: 56,401 Jee E. Lehrer				
Exchange Place			(617) 570-			
Boston, MA 02109 Tel. No.: (617) 570-1000			(617) 523-			
Fax No.: (617) 570-1000				Exchange Place		
Fax No.: (617) 523-1231 Customer No. 051414				Boston, MA 02109		
Customer No. 031414			L		·	